Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MISSOURI	_	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

### Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's	Julie First name		First name
	license or passport).	Middle name	-	Middle name
	Bring your picture	Smith		
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names and any assumed, trade names and doing business as names.			
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5231		

Debtor 1 Julie Smith Pg 2 of 62 Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):  EIN				
4.	Your Employer Identification Number (EIN), if any.	EIN					
5.	Where you live		If Debtor 2 lives at a different address:				
		108 Timberrun Saint Peters, MO 63376 Number, Street, City, State & ZIP Code Saint Charles County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				

Debtor 1 Julie Smith Pg 3 of 62 Case number (if known)

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	☐ Ch	apter 7						
		☐ Ch	apter 11						
		☐ Ch	apter 12						
		■ Ch	apter 13						
3.	How you will pay the fee	_	about how yo	u may pay. Typ attorney is sub	oically, if you are paying the fee yo	k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with			
			n, sign and attach the Application for Individuals to Pay						
			I request that but is not requ	my fee be wa	your fee, and may do so only if you	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line tha			
						installments). If you choose this option, you must fill out ial Form 103B) and file it with your petition.			
9.	Have you filed for bankruptcy within the last 8 years?	■ No.							
	•		District		When	Case number			
			District		 When	Case number			
			District		When	Case number			
0.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	3.						
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
1.	Do you rent your residence?	■ No.	Go to li	ne 12.					
		☐ Yes	<sub>s.</sub> Has yo	ur landlord obta	ained an eviction judgment against	t you?			
				No. Go to line	12.				
				Yes. Fill out In					

Debtor 1 Julie Smith Pg 4 of 62 Case number (if known)

Par	Report About Any Bu	sinesses	You Own	as a Sole Proprieto	or				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.					
		☐ Yes.	Name	and location of busi	ness				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	e & ZIP Code				
	it to this petition.		Chec	k the appropriate box	to describe your business:				
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))				
				Single Asset Real I	Estate (as defined in 11 U.S.C. § 101(51B))				
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))				
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))				
				None of the above					
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business debtor</i> or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).	proceed you are o	under Sui choosing to statement (B). I am r I am f Code.	illing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to inder Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or posing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S. and not filing under Chapter 11.  I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptor Code.  I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptor Code, a I do not choose to proceed under Subchapter V of Chapter 11.					
		☐ Yes.			1, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.				
Par	Report if You Own or	Have Any	Hazardo	ous Property or Any	Property That Needs Immediate Attention				
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No.	What is	the hazard?					
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code				

Debtor 1 Julie Smith Pg 5 of 62 Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Pq 6 of 62 Debtor 1 **Julie Smith** Case number (if known) **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **25,001-50,000** 1-49 you estimate that you **5001-10.000 5**0.001-100.000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **□** \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50.000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Julie Smith Signature of Debtor 2 Julie Smith Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on

February 27, 2023

Debtor 1 Julie Smith Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ William	H Ridings Jr	Date	February 27, 2023
Signature of	Attorney for Debtor		MM / DD / YYYY
William H	Ridings Jr		
Printed name			
Ridings La	aw Firm		
Firm name			
2510 S Bre	entwood Blvd		
Suite 205			
Brentwood	d, MO 63144		
Number, Street,	City, State & ZIP Code		
Contact phone	(314)968-1313	Email address	ridingslaw2003@yahoo.com
38672 MO			
Bar number & St	tate		

			Pg 8 of 62	
Fill in this inform	nation to identify your	case:		
Debtor 1	Julie Smith			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT C	F MISSOURI	
Case number _				
(if known)				Check if this is an amended filing
				 · ·

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pai	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	336,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	17,469.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	353,469.00
Pai	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	220,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	24,787.00
	Your total liabilities	\$	244,787.00
Pai	t 3: Summarize Your Income and Expenses	-	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	9,128.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	7,678.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other sc	nedules.
7.	■ Yes What kind of debt do you have?		
	- Variable and single state of		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

#### Filed 02/27/23 Entered 02/27/23 14:13:10 Main Document Case 23-40639 Doc 1 Pg 9 of 62 Case number (if known)

Debtor 1 Julie Smith

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9,128.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	1,000.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	1,000.00

	Case	23-40639	Doc 1 File	ed 02	12/123 Da	Entered 02/27/23	14:13:10	Main Do	ocument
Fill in	this inform	nation to identify	y your case and th	his filing		10 01 02			
Debtor	· 1	Julie Smith							
Dahtan	. 0	First Name	Middle	e Name		Last Name			
Debtor (Spouse,		First Name	Middl	e Name		Last Name			
United	States Bar	nkruptcy Court fo	r the: EASTERN	I DISTRI	CT OF MIS	SOURI			
Case r	number								Check if this is an
									amended filing
O.(	=	4004/5	_						
		rm 106A/E	_						
		e A/B: P	<u> </u>		anhi anaa	If an asset fite in more than an	antonomi, lint tha	accet in the	12/15
hink it f	its best. Be	as complete and	accurate as possib	le. If two	married peo	If an asset fits in more than one ople are filing together, both are	equally responsib	le for suppl	ying correct
	tion. If more every quest		attach a separate s	heet to th	nis form. On	the top of any additional pages	s, write your name	and case nu	umber (if known).
	•				<b>-</b>				
Part 1:	Describe I	Each Residence, E	Building, Land, or Of	ther Real	Estate You	Own or Have an Interest In			
l. Do yo	ou own or h	ave any legal or e	quitable interest in a	any resid	ence, buildi	ng, land, or similar property?			
	o. Go to Part	2.							
■ Ye	es. Where is	the property?							
1.1	08 Timbe	rriin		What	is the prope	erty? Check all that apply			
		f available, or other de	scription	. •	Single-fami	-			s or exemptions. Put aims on <i>Schedule D:</i>
						multi-unit building ium or cooperative			Secured by Property.
s	aint Pete	rs MO	63376-0000		Land	red or mobile home	Current value o		Current value of the
Ci		State	ZIP Code		Investment	t property	\$336,0	•	ortion you own? \$336,000.00
					Timeshare		Describe the na	ture of your	ownership interest
				Who	Other has an inter	rest in the property? Check one	(such as fee sir a life estate), if		y by the entireties, or
				WIIO	Debtor 1 or		, ··		
S	aint Char	les			Debtor 2 or	nly			
Co	ounty					nd Debtor 2 only			nity property
				Other		e of the debtors and another n you wish to add about this ite	(see instruction	ins)	
						cation number:	in, such as local		
2 <b>Δ</b> d	d the dolls	ar value of the n	ortion you own fo	or all of	vour entrie	es from Part 1, including any	ontries for		
									\$336,000.00
	_								
Part 2:	Describe \	Your Vehicles							
Do you	own, leas	e, or have legal	or equitable inter	rest in a	ny vehicle:	s, whether they are registere	ed or not? Includ	e any vehic	cles you own that
						: Executory Contracts and Un		•	•
3. Cars	s, vans, tru	ıcks, tractors, s	port utility vehicle	es, moto	rcycles				

■ No

☐ Yes

Doc 1 Filed 02/27/23 Entered 02/27/23 14:13:10 Case 23-40639 Main Document Pg 11 of 62 Case number (if known) Debtor 1 Julie Smith 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... \$1.500.00 misc furnishings, bedrooms (4), living room, dining room 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... misc electronics, tv (4), computer, smart phone \$750.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

■ No

☐ Yes. Describe.....

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

■ No

☐ Yes. Describe.....

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

□ No

Yes. Describe.....

misc clothing \$150.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

Yes. Describe.....

Case number (if known) Debtor 1 Julie Smith \$500.00 misc jewelry, wedding ring 13. Non-farm animals Examples: Dogs, cats, birds, horses Π Nο ■ Yes. Describe..... \$20.00 dogs (2) 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,920.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... Cash \$60.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... checking and **PNC** \$400.00 savings 17.1. \$89.00 PNC Bank, daughters 17.2. checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them

Official Form 106A/B Schedule A/B: Property page 3

Debtor	Case 23-4		Doc 1	Filed 02/2		Entered 3 of 62		23 14:13 Case numb		lain Docui	ment
Dobtoi	Julie Olli		suer name:				_	Ouse name	or (ii kilowii)		
Exa ■ N		in IRA, EF ount separ	RISA, Keogh,	401(k), 403(b), 1	thrift savin		or other p	ension or pr	rofit-sharing	plans	
You	amples: Agreeme	used depo	sits you have	e made so that yo paid rent, public u						nies, or others	
_	es				Institution	name or indi	vidual:				
■ N	•	•	iodic paymer	nt of money to yo	ou, either fo	or life or for a	number o	f years)			
26 U ■ N	J.S.C. §§ 530(b)(	1), 529A(b	), and 529(b)	unt in a qualified (1). description. Sepa							
■ N	• •		·	operty (other th	an anythi	ng listed in	line 1), an	d rights or	powers ex	ercisable for y	our benefit
<i>Exa</i> ■ N	amples: Internet	domain na	mes, website	ecrets, and others, proceeds from				ents			
Exa ■ N		permits, ex	clusive licen	ises, cooperative	e associatio	on holdings, l	liquor licen	nses, profes	sional licens	ses	
Money	or property ow	ed to you?	•							<b>portion</b> y Do not de	value of the you own? educt secured rexemptions.
<b>■</b> N		•	n about them	, including wheth	ner you alr	eady filed the	e returns a	nd the tax y	ears		
	nily support amples: Past due	e or lump s	um alimony,	spousal support,	child supp	port, mainten	ance, divo	orce settleme	ent, property	y settlement	

☐ No

■ Yes. Give specific information......

back child support, disputed \$14,000.00 child support

#### 30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

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Debtor 1

Case number (if known) Julie Smith 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$14.549.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information.......

Official Form 106A/B Schedule A/B: Property page 5

\$0.00

54. Add the dollar value of all of your entries from Part 7. Write that number here .....

Case number (if known) Debtor 1 **Julie Smith** Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ...... \$336,000.00 Part 2: Total vehicles, line 5 56. \$0.00 57. Part 3: Total personal and household items, line 15 \$2,920.00 58. Part 4: Total financial assets, line 36 \$14,549.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$17,469.00 Copy personal property total \$17,469.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$353,469.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	mation to identify your			
Debtor 1	Julie Smith			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MISSOURI	
Case number _ (if known)				☐ Check if this is an amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
108 Timberrun Saint Peters, MO 63376 Saint Charles County	\$336,000.00		\$15,000.00	RSMo § 513.475
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
misc furnishings, bedrooms (4), living room, dining room	\$1,500.00		\$1,500.00	RSMo § 513.430.1(1)
Line from Schedule A/B: <b>6.1</b>			100% of fair market value, up to any applicable statutory limit	
misc electronics, tv (4), computer, smart phone	\$750.00		\$750.00	RSMo § 513.430.1(1)
Line from Schedule A/B: <b>7.1</b>			100% of fair market value, up to any applicable statutory limit	
misc clothing Line from Schedule A/B: 11.1	\$150.00		\$150.00	RSMo § 513.430.1(1)
Ellie Holli Genedale Av.B. 11.1			100% of fair market value, up to any applicable statutory limit	
misc jewelry, wedding ring Line from Schedule A/B: 12.1	\$500.00		\$500.00	RSMo § 513.430.1(2)
Ellic Hotti Genedale AVD. 12.1			100% of fair market value, up to any applicable statutory limit	

Deb	tor 1	Julie Smith			Case number (if known)			
		escription of the property and line on ule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption		
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.			
	dogs	(2) om Schedule A/B: 13.1	\$20.00		\$20.00	RSMo § 513.430.1(3)		
	Line Irom Scheaule A/B: 13.1				100% of fair market value, up to any applicable statutory limit			
	Cash	om Schedule A/B: <b>16.1</b>	\$60.00		\$60.00	RSMo § 513.430.1(3)		
LINE	Lille IIC	om Schedule A/B. 19.1			100% of fair market value, up to any applicable statutory limit			
		king and savings: PNC	\$400.00		\$400.00	RSMo § 513.430.1(3)		
	LIIIG IIC	om Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit			
	(Subjed ■ N	es. Did you acquire the property cover	3 years after that for ca	ises fil	·	,		
	_	] No 1 Yes						

_						
_	Julie Smith					
r	First Name	Middle Name	Last Name			
or 2 e if, filing)	First Name	Middle Name	Last Name			
d States Bankru	ptcy Court for the	EASTERN DISTRICT OF MISS	SOURI			
number						if this is an led filing
ial Form 1	06D					
edule D:	Creditors	Who Have Claims	Secure	d by Propert	У	12/15
led, copy the Ader (if known).	ditional Page, fill it	out, number the entries, and attach it t				
ny creditors hav	e claims secured b	y your property?				
No. Check this	s box and submit t	his form to the court with your other	schedules. Y	ou have nothing else t	o report on this form.	
Yes. Fill in all	of the information	below.				
I ist All Sa	ocured Claims					
			Pr	Column A	Column B	Column C
ch claim. If more	than one creditor has	a particular claim, list the other creditors	s in Part 2. As Î	Amount of claim Do not deduct the	Value of collateral that supports this claim	Unsecured portion If any
Truist		Describe the property that secures t	he claim:	\$220,000.00	\$336,000.00	\$0.00
Creditor's Name		-				
•		apply.	Check all that			
Number, Street, City	, State & Zip Code	Unliquidated				
owes the debt?	Check one					
btor 1 only		_	mortanao or co	cured		
,		car loan)	nongage or se	cureu		
	2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)			
At least one of the debtors and another  Ugdgment lien from a lawsuit						
		Other (including a right to offset)	First Morto	gage		
lebt was incurre	d <b>2007</b>	Last 4 digits of account numb	ber <u>5231</u>			
	number  cial Form 1  nedule D:  complete and accled, copy the Addr (if known).  ny creditors hav  No. Check this  Yes. Fill in all  List All Secured claim. If more than possible, list the  Truist  Creditor's Name  214 N. Tryon  Charlotte, NC  Number, Street, City  bowes the debt?  btor 1 only  btor 2 only  btor 1 and Debtor  least one of the dieck if this claim  ommunity debt	number min)  Cial Form 106D  Dedule D: Creditors  Complete and accurate as possible. Led, copy the Additional Page, fill it or (if known).  In y creditors have claims secured by the Additional Page, fill it or (if known).  In y creditors have claims secured by the Additional Page, fill it or (if known).  In y creditors have claims secured by the Information the In	cial Form 106D  redule D: Creditors Who Have Claims  complete and accurate as possible. If two married people are filing togeth led, copy the Additional Page, fill it out, number the entries, and attach it is referenced to the copy the Additional Page, fill it out, number the entries, and attach it is referenced to the copy the Additional Page, fill it out, number the entries, and attach it is referenced to the copy the Additional Page, fill it out, number the entries, and attach it is referenced to the copy that attach it is referenced to the copy to the court with your other of the death of the court with your other of the death of the court with your other of the court with your other of the death of the court with your other of the death of the court with your other of the court with your other of the death of the court with your property?   Describe the property that secures the court with your other of the court with your other of the court with your property?  As of the date you file, the claim is: apply.  Contingent  Unliquidated  Disputed  Nature of lien. Check all that apply.  An agreement y	promplete and accurate as possible. If two married people are filing together, both are et led, copy the Additional Page, fill it out, number the entries, and attach it to this form. Or (if known).  In your creditors have claims secured by your property?  In No. Check this box and submit this form to the court with your other schedules. Yether, still in all of the information below.  It is all secured Claims  It all secured Claims  It more than one creditor has more than one secured claim, list the creditor separately the claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As as possible, list the claims in alphabetical order according to the creditor's name.  Truist  Describe the property that secures the claim:  108 Timberrun Saint Peters, MO (63376 Saint Charles County)  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or se car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)	Dial Form 106D  Redule D: Creditors Who Have Claims Secured by Propert  Complete and accurate as possible. If two married people are filing together, both are equally responsible for st led, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any addition (if known).  In or check this box and submit this form to the court with your other schedules. You have nothing else to the secured claims and particular claim, list the other creditor separately and claim. If more than one reditor has a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditors in Part 2. As a particular claim, list the creditor separately and particular claim.  Column A  Amount of claim Do not deduct the value of collateral.  \$220,000.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit  Amount of claim	Check amend   Check amend

Add the dollar value of your entries in Column A on this page. Write that number here: \$220,000.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$220,000.00

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Cuc	DC 20 40005 DOC 1	Pa 19 of 63		.1720 14.10.10	ividiii	Document
Fill in this info	ormation to identify your case:	Pg 13 01 02				
Debtor 1	Julie Smith					
Debior 1	First Name	Middle Name Last Nam	ne			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name Last Nam	ie			
United States I	Bankruptcy Court for the: EAS	TERN DISTRICT OF MISSOURI				
Cooo number						
Case number (if known)	-				П	Check if this is an
					_	amended filing
~ · · · -	400E/E				•	
	rm 106E/F					
<u> 3chedule</u>	E/F: Creditors Who I	Have Unsecured Claim	S			12/15
ame and case r	continuation Page to this page. If you number (if known).  All of Your PRIORITY Unsecur	u have no information to report in a P	art, do not	file that Part. On the t	op of any addi	tional pages, write your
	ditors have priority unsecured claim					
No. Go to	• •	s agamst you?				
Yes.	J Fait 2.					
identify what possible, list Part 1. If mo	type of claim it is. If a claim has both the claims in alphabetical order accor re than one creditor holds a particular	reditor has more than one priority unsecu- priority and nonpriority amounts, list that ding to the creditor's name. If you have r claim, list the other creditors in Part 3. instructions for this form in the instruction	claim here a nore than tw	and show both priority a	and nonpriority	amounts. As much as
				Total claim	Priority amount	Nonpriority amount
2.1 <b>IRS</b>		Last 4 digits of account number	5231	\$0.00	\$	\$0.00 \$0.00
,	Creditor's Name	When we the debt in some 10	2040	2047		
_	ox 7346 vency Unit	When was the debt incurred?	2010 -	2017	-	
	delphia, PA 19101					
	r Street City State Zip Code	As of the date you file, the claim	is: Check	all that apply		
Who incur	red the debt? Check one.	☐ Contingent				
Debtor	1 only	☐ Unliquidated				
☐ Debtor	2 only	☐ Disputed				
☐ Debtor	1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:			
☐ At least	one of the debtors and another	☐ Domestic support obligations				
☐ Check	if this claim is for a community del	Taxes and certain other debts	you owe the	e government		
	n subject to offset?	Claims for death or personal in	•	•		
■ No		☐ Other. Specify				
☐ Yes			ly husba	ands from when t	hey were	

married

De	btor 1 Julie Smith	Pg 20 01 62	Case number (	if known)			
2.2	Missouri Dept of Revenue  Priority Creditor's Name 301 W High St  Jefferson City, MO 65105  Number Street City State Zip Code  Who incurred the debt? Check one.	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim  Contingent		<b>\$0.00</b>	\$0.00	\$0.00	
	■ Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:				
	At least one of the debtors and another	☐ Domestic support obligations					
	☐ Check if this claim is for a community debt  Is the claim subject to offset?  ■ No ☐ Yes	■ Taxes and certain other debts y □ Claims for death or personal inju □ Other. Specify notice	ury while you were in				
2.3		Last 4 digits of account number		\$0.00	\$0.00	\$0.00	
2.0	Priority Creditor's Name Collector of Revenue 201 N Second St Suite 134	When was the debt incurred?		Ψ0.00	φυ.συ	Ψ0.00	
	Saint Charles, MO 63301  Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that an	nly			
	Who incurred the debt? Check one.	☐ Contingent	oricok dir triat ap	Priy			
	■ Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:				
	☐ At least one of the debtors and another	☐ Domestic support obligations					
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	■ Taxes and certain other debts y □ Claims for death or personal inju	<del>-</del>				
	☐ Yes	<u> </u>					
Pa	rt 2: List All of Your NONPRIORITY Unsecu	ıred Claims					
	Do any creditors have nonpriority unsecured claim						
	No. You have nothing to report in this part. Submit		chedules.				
	Yes.	,					

Total claim

Part 2.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of

Case number (if known) Debtor 1 Julie Smith 4.1 Aargon Agency Inc \$821.00 Last 4 digits of account number 9171 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? **Opened 02/22** 8668 Spring Mountain Road Las Vegas, NV 89117 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Ameren Missouri ☐ Yes 4.2 **Account Resolution Corp** 9083 \$114.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcv When was the debt incurred? **Opened 01/19** 700 Goddard Ave Chesterfield, MO 63005 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Radiologic Imaging ☐ Yes Other. Specify Consultants 4.3 Americollect, Inc Last 4 digits of account number 5131 \$120.00 Nonpriority Creditor's Name Opened 06/20 Last Active Po Box 1566 1851 South Alverno Road When was the debt incurred? 02/20 Manitowoc, WI 54221 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Ssm Health Medical** ■ Other. Specify Group ☐ Yes

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Pg 22 of 62 Case number (if known) Debtor 1 Julie Smith \$2,052.00 4.4 AssetCare Last 4 digits of account number 1175 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? **Opened 08/22** 2222 Texoma Parkway, Suite 180 Sherman, TX 75090 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney St Charles Emergency ■ Other. Specify Group Llc ☐ Yes **Consumer Collection Management,** 4.5 7492 \$5,790.00 Last 4 digits of account number Inc. Nonpriority Creditor's Name Attn: Bankruptcy Opened 11/18 Last Active Po Box 1839 When was the debt incurred? 06/18 Maryland Heights, MO 63043 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other Specify Collection Attorney Springwell Village ☐ Yes 4.6 Credit Collection Services \$517.00 Last 4 digits of account number 4160 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? **Opened 03/18** 725 Canton St Norwood, MA 02062 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Progressive

Pg 23 of 62 Case number (if known) Debtor 1 Julie Smith

4.7	Day Knight	Last 4 digits of account number	1886	\$286.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Dept		Opened 9/09/16 Last Active				
	P O Box 5	When was the debt incurred?	08/16				
	Grover, MO 63040	_					
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.	_					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	n along and other similar dalate				
	■ No	Debts to pension or profit-sharin	• •				
	Yes	■ Other. Specify Medical De	bt Savita Bhat Md				
4.8	First Premier Bank	Last 4 digits of account number	5130	\$998.00			
	Nonpriority Creditor's Name	_		·			
	Attn: Bankruptcy	When we do	Opened 11/19 Last Active				
	Po Box 5524 Sioux Falls, SD 57117	When was the debt incurred?	02/21				
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent ☐ Unliquidated					
	Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other Specify Credit Card					
4.9	First Premier Bank	Last 4 digits of account number	3062	\$782.00			
	Nonpriority Creditor's Name  Attn: Bankruptcy		Opened 10/17 Last Active				
	Po Box 5524	When was the debt incurred?	03/21				
	Sioux Falls, SD 57117	_					
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes						
	☐ Yes ☐ Other. Specify Credit Card						

Doc 1 Filed 02/27/23 Entered 02/27/23 14:13:10 Main Document Case 23-40639 Pg 24 of 62 Case number (if known) Debtor 1 Julie Smith 4.1 Kohls/Capital One 4222 \$476.00 Last 4 digits of account number 0 Nonpriority Creditor's Name **Attn: Credit Administrator** Opened 03/15 Last Active Po Box 3043 When was the debt incurred? 07/16 Milwaukee, WI 53201 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 **MCA Management Co** 9825 \$60.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 1/11/18 Last Active 2835a High Ridge Blvd When was the debt incurred? 07/17 High Ridge, MO 63049 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other Specify Medical Debt Total Access Urgent Care ☐ Yes 4.1 Merrick Bank Corp 3116 \$2,832.00 Last 4 digits of account number 2 Nonpriority Creditor's Name Opened 05/08 Last Active Po Box 9201 When was the debt incurred? 07/16 Old Bethpage, NY 11804 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

Debtor 2 only

Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community

debt

Is the claim subject to offset?

■ No

☐ Yes

■ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not

report as priority claims

lacksquare Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Credit Card

Filed 02/27/23 Entered 02/27/23 14:13:10 Doc 1 Main Document Case 23-40639 Pg 25 of 62 Case number (if known) Debtor 1 Julie Smith 4.1 **Midwest Recovery Systems** 7904 \$1,020.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Bankruptcy Opened 08/18 Last Active Po Box 899 When was the debt incurred? 05/18 Florissant, MO 63032 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney St. Charles County ☐ Yes ■ Other. Specify Ambulance D \$246.00

National Health Care Col	Last 4 digits of account number	0103		
Nonpriority Creditor's Name Attn: Bankruptcy Dept	When was the debt incurred?	Opened 07/20		
153 Chesterfield Business Parkway Ste. 2				
Chesterfield, MO 63005  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
No	Debts to pension or profit-sharin	g plans, and other similar debts		
☐ Yes	Other Specify Collection I	Attorney Podiatry Associates Inc		

2200 **Navient** Last 4 digits of account number Nonpriority Creditor's Name Opened 6/23/06 Last Active Attn: Bankruptcy Po Box 9500 6/20/11 When was the debt incurred? Wilkes-Barre, PA 18773 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Educational

4.1

\$1,000.00

Pg 26 of 62 Case number (if known) Debtor 1 Julie Smith

OneMain Financial	Last 4 digits of account number	9548	\$3,756.0		
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3251	When was the debt incurred?	Opened 06/20 Last Active 1/09/23			
Evansville, IN 47731	When was the debt incurred.	1703723			
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community debt	☐ Student loans				
Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
☐ Yes	Other. Specify Unsecured				
Decourage Conited Complete		0707	<b>\$2.750</b>		
Resurgent Capital Services  Nonpriority Creditor's Name	Last 4 digits of account number	8787	\$2,758.		
Attn: Bankruptcy		Opened 02/17 Last Active			
Po Box 10497	When was the debt incurred?	07/16			
Greenville, SC 29603  Number Street City State Zip Code	As of the date you file, the claim i	in Check all that apply			
Who incurred the debt? Check one.	As of the date you file, the claim	<b>s</b> : Спеск ан that аррну			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
Check if this claim is for a community	Student loans				
debt Is the claim subject to offset?	□ Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not			
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
Yes	■ Other. Specify Factoring C Bank N.A.	Company Account Credit One			
Resurgent Capital Services	Last 4 digits of account number	3864	\$1,159.		
Nonpriority Creditor's Name			<b>V</b> 1,1001		
Attn: Bankruptcy		Opened 02/17 Last Active			
Po Box 10497	When was the debt incurred?	07/16			
Greenville, SC 29603  Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
Who incurred the debt? Check one.		· · · · · · · · · · · · · · · · · · ·			
■ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt	Obligations arising out of a separation agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sharing plans, and other similar debts				
		Company Account Credit One			

Part 3: List Others to Be Notified About a Debt That You Already Listed

Case 23-40639 Doc 1 Filed 02/27/23 Entered 02/27/23 14:13:10 Main Document Pg 27 of 62 Case number (if known)

Debtor 1 Julie Smith

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
T-4-1	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
rom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
「otal	6f.	Student loans	6f.	\$ 1,000.00
laims				
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 23,787.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 24,787.00

Fill in this infor				
Debtor 1	Julie Smith			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MISSOURI	
Case number (if known)				☐ Check if this is an amended filing

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				_
	Nicosaleses	Ott			_
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4	<u> </u>		<u> </u>		
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			_
		Jugot			
	City		State	ZIP Code	

Fill in this into			Pg 29 of 62	721720 2 1120120	
	rmation to identify your	case:			
Debtor 1	Julie Smith First Name	Middle Name	Last Name		
Debtor 2	i list Name	Middle Name	Lastivanie		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	EASTERN DISTRICT O	F MISSOURI		
Case number (if known)					☐ Check if this is an amended filing
	orm 106H • H: Your Cod	ebtors			12/15
people are filing	g together, both are equ umber the entries in the	ally responsible for supp	olying correct informa In the Additional Page	tion. If more space is	rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write
1. Do you l	nave any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
□ No ■ Yes					
		I <b>lived in a community pr</b> Nevada, New Mexico, Pu			ty states and territories include )
■ No. Go t	n line 3				
		use, or legal equivalent live	e with you at the time?		
in line 2 ag	jain as a codebtor only i ), Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make	sure you have listed t	ng with you. List the person shown the creditor on Schedule D (Officia , Schedule E/F, or Schedule G to fi
	mn 1: Your codebtor Number, Street, City, State and Zl	P Code		Column 2: The cr Check all schedul	reditor to whom you owe the debt les that apply:
6100 Unit	ert Smith 9 Saphire Village 149 nomas, VI 00802			■ Schedule D, □ Schedule E/F □ Schedule G _ Truist	-, line

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

						_				
Fill	in this information to identify yo	our case:								
Deb	otor 1 Julie Sn	nith			_					
	otor 2 use, if filing)									
Uni	ted States Bankruptcy Court fo	r the: EASTERN DISTRICT	OF MISSOURI		_					
(If kn	se number		-			☐ A sup	nended filir plement st	howing p	postpetition owing date:	
	fficial Form 106l					MM /	DD/ YYYY	<del>,</del>		
So	chedule I: Your I	ncome								12/15
spoi	plying correct information. If use. If you are separated and the asseparate sheet to this formation.  Describe Employment information.	your spouse is not filing worm. On the top of any addit	ith you, do not inclu	ıde infor	mati	on about you d case numb	ur spouse. er (if knov	. If more vn). Ans	e space is	needed,
		•	■ Employed				Employed		.g oposioo	
	If you have more than one jo attach a separate page with information about additional	Employment status	■ Employed  □ Not employed				Not emplo			
	employers.	Occupation	Homemaker/Ca	retaker						
	Include part-time, seasonal, self-employed work.	Employer's name								
	Occupation may include stude or homemaker, if it applies.	ent Employer's address								
		How long employed t	here?							
Par	t 2: Give Details About	Monthly Income								
spou If yo	mate monthly income as of t use unless you are separated. u or your non-filing spouse have e space, attach a separate she	re more than one employer, c	,		,	, ,	·		,	J
						For Debtor		or Debte on-filing	or 2 or g spouse	
2.	List monthly gross wages, deductions). If not paid mon			2.	\$		0.00 \$		N/A	
3.	Estimate and list monthly of	overtime pay.		3.	+\$		<u>0.00</u> +\$	S	N/A	
4.	Calculate gross Income. A	dd line 2 + line 3.		4.	\$	0.0	00	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1	Julie Smith		C	Case number (if known)				
	Сор	y line 4 here	4.		For Debtor 1 \$ 0.00		Debtor 2 of		
5.	List	all payroll deductions:							
J.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a 5b 5c 5d 5e 5f. 5g 5h	). ;. l. ).	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	\$ \$ \$ \$ + \$		N/A N/A N/A N/A N/A N/A N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	\$		N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	\$		N/A	
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: daughers SSI  Pension or retirement income  Other monthly income. Specify:	8a 8b 8c 8d 8e 8f. 8f.	).  -  .  -	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 39.00 \$ 589.00 \$ 0.00 \$ 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		N/A N/A N/A N/A N/A N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	9,128.00	\$		N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	9,128.00 + \$_		<b>N/A</b> =	\$	9,128.00
11.	Incluothe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe		•		chedule J. 11. +	\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain ies					_	ombin	
13.	Do y	you expect an increase or decrease within the year after you file this form?  No.  Yes. Explain:	?				m	onthly	income

Official Form 106l Schedule I: Your Income page 2

					1		
FIII	in this information to ider	itify your case:					
Deb	otor 1 Julie Sr	mith			Chec	ck if this is:	
					_	An amended filing	
	otor 2						ving postpetition chapter
(Spo	ouse, if filing)					13 expenses as of	the following date:
Unit	ed States Bankruptcy Court	for the: EASTE	RN DISTRICT OF MISSOL	JRI	-	MM / DD / YYYY	
Cas	e number						
(lf kı	nown)						
Of	fficial Form 10	6J			-		
	chedule J: Yo		1606				40/45
				a filing tagathar h	oth are equ	ally recognished fo	12/15
info		is needed, atta	<ul> <li>If two married people an ach another sheet to this ton.</li> </ul>				
Par	t 1: Describe Your I	Household					
1.	Is this a joint case?						
	No. Go to line 2.						
	☐ Yes. Does Debtor 2	2 live in a separ	ate household?				
	□ No						
		2 must file Offic	ial Form 106J-2, Expenses	for Separate House	ehold of Deb	tor 2.	
_			•	•			
2.	Do you have depende	ents? No					
	Do not list Debtor 1 and Debtor 2.	■ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the						□ No
	dependents names.			daughter		27	■ Yes
							□ No
							☐ Yes
							□ No
							☐ Yes
							□ No
							☐ Yes
3.	Do your expenses inc expenses of people o		No				
	yourself and your dep		l Yes				
	<u> </u>						
	t 2: Estimate Your C		ly Expenses uptcy filing date unless y	au ara uaina thia f		unnlament in a Cha	nter 12 case to report
exp			cy is filed. If this is a supp				
Incl	lude expenses paid for	with non-cash	government assistance if	f vou know			
the	value of such assistan		cluded it on Schedule I: Y			V	
(Off	ficial Form 106I.)					Your expe	enses
	The manufal and a second						
4.	payments and any rent		nses for your residence. In	nclude first mortgage	e 4. \$	\$	2,081.00
	If not included in line	Ü					
					4- 4	•	0.00
	<ul><li>4a. Real estate taxes</li><li>4b. Property, homeo</li></ul>		r's insurance		4a. \$ 4b. \$	·	0.00
			upkeep expenses		4c. \$		0.00 150.00
	4d. Homeowner's as				4d. \$		0.00
5.			our residence, such as ho	me equity loans	5. \$	·	0.00

Debtor '	1 Julie Smi	ith		Case num	nber (if known)	
6. <b>Uti</b> 6a.	ilities: . Electricity,	heat	natural das	6a.	\$	450.00
6b.	•		rbage collection	6b.	· -	250.00
6c.		_	phone, Internet, satellite, and cable services	6c.	·	281.00
6d.	•		money matrice, outcome, and ouble services	6d.	·	0.00
	od and house	-	ng supplies	7.	·	600.00
		-	n's education costs	8.	*	0.00
_			d dry cleaning	9.		210.00
	•		ts and services	10.	·	130.00
	edical and der			11.		50.00
			e gas, maintenance, bus or train fare.		Ψ	30.00
	not include ca			12.	\$	120.00
			recreation, newspapers, magazines, and books	13.	\$	0.00
			ons and religious donations	14.	\$	0.00
5. <b>Ins</b>	surance.		-			
Do	not include in:	surano	ce deducted from your pay or included in lines 4 or 20.			
	a. Life insura			15a.	·	110.00
151	b. Health insu	ırance		15b.	\$	0.00
150	c. Vehicle ins	uranc	e	15c.	\$	181.00
	d. Other insur		· · ·	15d.	\$	0.00
		clude 1	axes deducted from your pay or included in lines 4 or 20.			
	ecify:			16.	\$	0.00
	stallment or le			4-	•	
	a. Car payme			17a.		0.00
	b. Car payme			17b.	·	0.00
			daughters nursing care	17c.		1,265.00
170			disabled daughters supplies, catheter, etc	17d.		450.00
	income to				\$	1,000.00
· ·	income to				\$	350.00
			nony, maintenance, and support that you did not report as	; 18.	\$	0.00
			ay on line 5, Schedule I, Your Income (Official Form 106I). nake to support others who do not live with you.		¢ ———	0.00
	ecify:	you .	make to support officio who do not live with you.	19.	Ψ	0.00
		ertv ex	penses not included in lines 4 or 5 of this form or on Scho			
	a. Mortgages			20a.		0.00
	b. Real estate			20b.	·	0.00
200	c. Property, h	omeo	wner's, or renter's insurance	20c.	\$	0.00
			pair, and upkeep expenses	20d.	\$	0.00
			sociation or condominium dues	20e.		0.00
-	her: Specify:				+\$	0.00
_						3.33
	Iculate your n		•			
	a. Add lines 4	_			\$	7,678.00
		•	thly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
220	c. Add line 22a	and 2	22b. The result is your monthly expenses.		\$	7,678.00
3 Ca	lculate vour n	nonth	ly net income.			
	-		ur combined monthly income) from Schedule I.	23a.	\$	9,128.00
			ally expenses from line 22c above.	23b.	·	7,678.00
ادے	Copy your		0. Por 1000 Horri III 0 220 abovo.	۷۵۵.		1,010.00
230	c. Subtract vo	our mo	onthly expenses from your monthly income.			
			r monthly net income.	23c.	\$	1,450.00
		,	,			
			ease or decrease in your expenses within the year after yo			
			ct to finish paying for your car loan within the year or do you expect you	r mortgage	payment to incre	ase or decrease because of a
		erms o	f your mortgage?			
	No.					
	Yes.	Expla	in here:			

Fill in this infor	mation to identify your	case:			
Debtor 1	Julie Smith				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MISSOURI		
Case number					
(if known)					☐ Check if this is an amended filing
Official Form		ın Individual	Debtor's Sc	hedules	12/15
ears, or both. 1	8 U.S.C. §§ 152, 1341, 1				imprisonment for up to 20
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes.	Name of person				cy Petition Preparer's Notice, Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the sumi	mary and schedules file	d with this declaration an	d
X /s/ Jul	ie Smith		X		
Julie S			Signature of	Debtor 2	
	re of Debtor 1		- <b>3</b>		
Date	February 27, 2023		Date		

Official Form 106Dec

FII	l in this info	rmation to identify you	ır case:					
De	btor 1	Julie Smith						
		First Name	Middle Name		Last Name			
	btor 2 ouse if, filing)	First Name	Middle Name		Last Name			
Un	itad States R	ankruptcy Court for the:	EASTERN DISTRIC	T OF MISS	SOURI			
011	iled States D	ankrupicy Court for the	<u> </u>	or whoc	5001(1			
1	se number							
(11 K	nown						_	neck if this is an nended filing
							a.i.	nonaca ming
$\sim$	ficial E	arma 107						
		orm 107	Accelus Combod		la Ellina (an B	\		
St	atemen	t of Financial	Affairs for Ind	ividua	is Filing for B	sankruptcy		04/2
			ible. If two married peo					
		more space is needed vn). Answer every que		et to this i	orm. On the top or an	y additional pages, v	vrite your	r name and case
Pa	rt 1: Give	Details About Your M	arital Status and Where	You Live	d Refore			
				o Tou Live	<u>u Belore</u>			
1.	What is yo	ur current marital stat	us?					
	☐ Marrie	d						
	Not ma	arried						
2.	During the	last 3 years, have you	lived anywhere other t	than where	e vou live now?			
	During the	idot o youro, navo you	invoca any mnoro outor v		. you			
	■ No							
	☐ Yes. L	ist all of the places you	lived in the last 3 years.	Do not incl	ude where you live nov	V.		
	Debtor 1:		Dates Deb		Debtor 2 Prior Ac	ldress:		Dates Debtor 2
			lived there					lived there
3.			ver live with a spouse					
stat	es and territo	ories include Arizona, Ca	alifornia, Idaho, Louisiana	a, Nevada,	New Mexico, Puerto R	ico, Texas, Washingto	on and Wi	sconsin.)
	■ No							
	☐ Yes. N	Make sure you fill out So	hedule H: Your Codebto	rs (Official	Form 106H).			
Pa	et 2 Evel	ain the Sources of Ver	ır İncomo					
Га	Expir	ain the Sources of You	in income					
4.			mployment or from ope				us calen	dar years?
			ou received from all jobs I have income that you re					
	ii you are iii	ing a joint oddo and you	Thave moonie that you is	cocive loge	orner, not it offiny office di	ider Debter 1.		
	No							
	☐ Yes. F	ill in the details.						
			Debtor 1			Debtor 2		
			Sources of income		oss income	Sources of incom		Gross income
			Check all that apply.		efore deductions and clusions)	Check all that apply	y.	(before deductions and exclusions)
				GA	oldolol lo <sub>j</sub>			and oxoldolonoj

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5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, uner and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling a winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.										
ı	_ist each	source and t	he gross inco	me from each source sep	arately. Do not include in	come tha	at you listed in lin	e 4.		
[ I	□ No ■ Yes.	Fill in the de	etails.							
				Debtor 1			Debtor 2			
				Sources of income Describe below.	Gross income fro each source (before deductions exclusions)		Sources of inco Describe below.		Gross income (before deductions and exclusions)	
		y 1 of curre filed for bar	nt year until nkruptcy:	alimony	\$8,50	00.00				
				daughters ssi	\$58	39.00				
		ndar year: December	31, 2022 )	alimony	\$102,00	00.00				
				daughters ssi	\$7,00	00.00				
For the calendar year before that: (January 1 to December 31, 2021)				alimony	slimony \$102,000.00					
				daughters ssi	\$6,80	00.00				
Part	3: Lis	t Certain Pa	yments You	Made Before You Filed	for Bankruptcy					
			•							
	Are eithe □ No.	Neither De	ebtor 1 nor D	's debts primarily consu bebtor 2 has primarily co personal, family, or house	nsumer debts. Consum	er debts a	are defined in 11	U.S.C. § 101	(8) as "incurred by an	
		During the	90 days befo	re you filed for bankruptcy	, did you pay any credito	r a total o	of \$7,575* or mor	e?		
		□ Yes	List below e	each creditor to whom you editor. Do not include payl						
		* Subject		payments to an attorney f on 4/01/25 and every 3 y		filed on o	r after the date of	f adjustment.		
İ	Yes.			r both have primarily co re you filed for bankruptcy		or a total o	of \$600 or more?			
		■ No.	Go to line 7							
		□ <sub>Yes</sub>	include pay	each creditor to whom you ments for domestic suppo this bankruptcy case.						
	Creditor	's Name and	d Address	Dates of pay		ount paid	Amount you still owe	Was this p	ayment for	

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7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporation of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.											
	■ No											
	☐ Yes. List all payments to an insider.											
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment							
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a debt that benefited an							
	No											
	Yes. List all payments to an insider											
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name							
Pai	t 4: Identify Legal Actions, Repossession	s and Foreclosures										
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.	cases, small claims actions	s, divorces, collectio		ctions, support or custody							
	Case title Case number	Nature of the case Court or agency			Status of the case							
	Lvnv Funding Llc vs JULIE SMITH 1911AC08323	GARNISHMENT	ST. CHARLES CIRCUIT COURT - ALL DIVISION		☐ Pending ☐ On appeal ☐ Concluded							
					- 2,241.00							
	Lvnv Funding Llc vs JULIE SMITH 1911AC08323	CIVIL JUDGMENT ST. CHAR COURT - A			☐ Pending ☐ On appeal ☐ Concluded - 2,044.00							
	Internal Revenue Service vs JULIE SMITH, ROBERT SMITH 20190326000133100	FEDERAL TAX LIEN	ST CHARLES ( COURT	COUNTY	☐ Pending ☐ On appeal ☐ Concluded - 656,027.00							
	Springwell Village Townhomes vs JULIE SMITH 1811AC02948	CIVIL NEW FILING	COURT Or		☐ Pending ☐ On appeal ☐ Concluded - 0.00							
	Lvnv Funding Llc vs JULIE SMITH 1711AC06532	GARNISHMENT ST CHARLES COURT		CIRCUIT	☐ Pending ☐ On appeal ☐ Concluded - 975.00							

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Dobtor 1	Julie Smith	Pg 38 of 62	Case number (if known)
Deploi	Julie Smith	•	Case number (# known)

Case title Case number		Nature of the case Court or agency			Status of the case		
	Lvnv Funding Llc vs JULIE SMITH 1711AC06532	CIVIL JUDGMENT	CIVIL JUDGMENT ST CHARLES CIRCUIT COURT		☐ Pending ☐ On appeal ☐ Concluded		
					- 0.00		
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details below.  No. Go to line 11.		erty repossessed, foreclosed	I, garnish	ed, attached	, seized, or levied?	
	Yes. Fill in the information below.						
	Creditor Name and Address	Describe the Property  Explain what happened	d	Date		Value of the property	
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No Yes. Fill in the details.		luding a bank or financial in	stitution, s	set off any a	mounts from your	
	Creditor Name and Address	Describe the action the	e creditor took	Date ac	ction was	Amount	
Par	Within 2 years before you filed for bankru  ■ No  □ Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person	another official? ptcy, did you give any gift	s with a total value of more t	han \$600	per person? /ou gave		
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankrup  ■ No  □ Yes. Fill in the details for each gift or contains the		s or contributions with a tota	al value of	more than s	\$600 to any charity?	
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal Describe what you	u contributed	Dates y contrib		Value	
Par	t 6: List Certain Losses						
15.	Within 1 year before you filed for bankrup or gambling?  No	tcy or since you filed for b	oankruptcy, did you lose any	thing bec	ause of thefi	;, fire, other disaster,	
	how the loss occurred	Describe any insurance conclude the amount that insurance claims on line 33 of the surance can be s	rance has paid. List pending	Date of loss	your	Value of property lost	
Par	t 7: List Certain Payments or Transfers						

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Case number (if known) Debtor 1 Julie Smith

	consulted about seeking bankruptcy or prep Include any attorneys, bankruptcy petition prepa			ices required	in your bankruptcy.				
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and variansferred	Description and value of any property transferred			Amount of payment			
	Ridings Law Firm 2510 S Brentwood Blvd Suite 205 Brentwood, MO 63144 ridingslaw2003@yahoo.com		Attorney Fees \$600, filing fees \$313, credit report fee \$37		2/27/23	\$950.00			
	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you  No Yes. Fill in the details.	rs or to make payments			r transfer any prope	rty to anyone who			
	Person Who Was Paid Address	Description and variansferred	Description and value of any property transferred			Amount of payment			
	Within 2 years before you filed for bankrupto transferred in the ordinary course of your bu Include both outright transfers and transfers ma include gifts and transfers that you have already  No  Yes. Fill in the details.	usiness or financial affa de as security (such as	airs? the granting of a sec						
	Person Who Received Transfer Address	Description and very property transfer			ny property or received or debts change	Date transfer was made			
	Person's relationship to you  Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-pro  No  Yes. Fill in the details.		ny property to a sel	lf-settled tru	st or similar device	of which you are a			
	Name of trust	Description and v	alue of the proper	ty transferre	ed	Date Transfer was made			
Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage.									
	houses, pension funds, cooperatives, associations, and other financial institutions.  No								
	Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Last 4 digits of account or instrument closed, sold, moved, or transferred								

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Case number (if known) Debtor 1 Julie Smith

21.	21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?									
	■ No									
	Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?						
22.	Have you stored property in a storage unit or p	place other than your home within 1	year before you filed for bankruptcy	?						
	■ No									
	Yes. Fill in the details.									
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?						
Par	t 9: Identify Property You Hold or Control for	Someone Else								
23.	Do you hold or control any property that some for someone.	one else owns? Include any proper	ty you borrowed from, are storing for	r, or hold in trust						
	■ No									
	Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value						
Par	t 10: Give Details About Environmental Inform	nation								
For	the purpose of Part 10, the following definitions	s apply:								
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, ground	•							
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa		law, whether you now own, operate,	or utilize it or used						
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or	nmental law defines as a hazardous	waste, hazardous substance, toxic	substance,						
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of wher	they occurred.							
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environment	ental law?						
	■ No									
	Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
25.	Have you notified any governmental unit of any	y release of hazardous material?								
	■ No □ Yes. Fill in the details.									
		Governmental unit	Environmental law if you	Date of notice						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						

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. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person

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Fill in this information to identify your case:									
Debtor 1	Julie Smith								
Debtor 2 (Spouse, if filing)									
United States B	Sankruptcy Court for the:	Eastern District of Missouri							
Case number (if known)									

Check	Check as directed in lines 17 and 21:									
According to the calculations required by this Statement:										
1. Disposable income is not determined 11 U.S.C. § 1325(b)(3).										
2. Disposable income is determined unde U.S.C. § 1325(b)(3).										
☐ 3. The commitment period is 3 years.										
	4. The commitment period is 5 years.									
	☐ Check if this is an amended filing									

#### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

	Part	1: Calculate Your Average Monthly Income							
Ī	1.	What is your marital and filing status? Check one of	only.						
		■ Not married. Fill out Column A, lines 2-11.							
		☐ Married. Fill out both Columns A and B, lines 2-11							
	10 th	Il in the average monthly income that you received from al 11(10A). For example, if you are filing on September 15, the 6- e 6 months, add the income for all 6 months and divide the tot- ouses own the same rental property, put the income from that	month peal by 6. F	eriod would fill in the re	l be March 1 thro sult. Do not inclu	ugh Aug de any ir	ust 31. If the amo	ount of your monthly incon ore than once. For examp	ne varied during le, if both
						Colum Debto		Column B Debtor 2 or non-filing spouse	
	2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and c	ommissio	ons (before all	\$	0.00	\$	
	3.	<b>Alimony and maintenance payments.</b> Do not includ Column B is filled in.	e paym	ents from	a spouse if	\$	8,500.00	\$	
	4.	All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Do not include payments from a spot you listed on line 3.	<b>rt.</b> Includ	de regulai depende	r contributions nts, parents,	\$	0.00	\$	
	5.	Net income from operating a business, profession, or farm	Debto	r 1					
l		Gross receipts (before all deductions)	\$_	0.00					
l		Ordinary and necessary operating expenses	<b>-</b> \$ _	0.00					
l		Net monthly income from a business, profession, or fa	arm \$_	0.00	Copy here ->	•\$	0.00	\$	
	6.	Net income from rental and other real property	Debto						
		Gross receipts (before all deductions)	\$_	0.00					
		Ordinary and necessary operating expenses	<b>-</b> \$ _	0.00					
1		Not monthly income from rental or other real property	Ф	0.00	Copy here ->	· \$	0.00	\$	

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Case number (if known)

Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you\_\_\_\_\_ For your spouse 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. daughters SS 628.00 0.00 Total amounts from separate pages, if any. 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 9.128.00 9,128.00 \$ each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 9,128.00 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. ☐ You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 9.128.00 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 9.128.00 15a. Copy line 14 here=>

**Julie Smith** 

Debtor 1

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Debte	or 1 _	Julie	Smith		Case number (if known)		
		Mult	tiply line 15a by 12 (the number of months in	ı a year).		х	12
	15b	. The	result is your current monthly income for the	year for this part of th	ne form	\$	109,536.00
16	. Calc	ulate t	he median family income that applies to y	ou. Follow these step	s:		
	16a.	Fill in t	he state in which you live.	МО			
	16b.	Fill in t	he number of people in your household.	2			
		To find	he median family income for your state and a list of applicable median income amounts tions for this form. This list may also be avai	s, go online using the li		\$	69,699.00
17			e lines compare?				
	17a.	Ц	Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N				
	17b.		Line 15b is more than line 16c. On the top 1325(b)(3). <b>Go to Part 3 and fill out Calcu</b> your current monthly income from line 14 a	lation of Your Dispo			
Par	t 3:	Calc	ulate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)			
18.	Copy	y your	total average monthly income from line 1	1.		\$	9,128.00
19.	conte spou	end tha se's inc	marital adjustment if it applies. If you are it calculating the commitment period under 1 come, copy the amount from line 13. narital adjustment does not apply, fill in 0 on	married, your spouse 1 U.S.C. § 1325(b)(4)	is not filing with you, and you	<b>-</b> \$	0.00
	19b.	Subtra	act line 19a from line 18.			\$	9,128.00
20.	Calc	ulate y	our current monthly income for the year.	Follow these steps:			
	20a.	Сору I	ine 19b			\$	9,128.00
		Multipl	y by 12 (the number of months in a year).			X	12
	20b.	The re	sult is your current monthly income for the y	ear for this part of the	form	\$	109,536.00
	20c.	Copy t	he median family income for your state and	size of household fron	n line 16c	\$	69,699.00
	21.	How d	lo the lines compare?			L	
			ine 20b is less than line 20c. Unless otherwieriod is 3 years. Go to Part 4.	se ordered by the cou	rt, on the top of page 1 of this form, chec	ck box 3, <i>Tl</i>	ne commitment
			ine 20b is more than or equal to line 20c. Ur ommitment period is 5 years. Go to Part 4.	less otherwise ordere	d by the court, on the top of page 1 of th	is form, che	eck box 4, The
Par	t 4:	Sign	Below				
	By si	gning l	nere, under penalty of perjury I declare that t	he information on this	statement and in any attachments is tru	e and corre	ect.
<b>)</b>		Julie : ie Sm	Smith ith				
	·		of Debtor 1				
	⊔ate		Tuary 27, 2023 DD / YYYY				
	If you		xed 17a, do NOT fill out or file Form 122C-2.				
	If you	ı check	xed 17b, fill out Form 122C-2 and file it with t	his form. On line 39 of	that form, copy your current monthly in	come from	line 14 above.

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Fill in	this information to i	lentify your case:		
Debtor	Julie Smi	h		
Debtor				
(Spous	se, if filing)			
United	States Bankruptcy C	ourt for the: Eastern District of Missouri		
Case r	number wn)		Check if this is an amended filing	
Official	I Form 122C-2			
Cha	pter 13 Cald	ulation of Your Disposable Income		04/22
	out this form, you wi itment Period (Offici	I need your completed copy of <i>Chapter 13 Statement of Your Current Mo</i> Il Form 122C-1).	onthly Income and Calculation of	
space i	is needed, attach a s	te as possible. If two married people are filing together, both are equally eparate sheet to this form, Include the line number to which additional in name and case number (if known).		nore
Part 1	Calculate Your	Deductions from Your Income		
the	questions in lines 6-	rvice (IRS) issues National and Local Standards for certain expense am 15. To find the IRS standards, go online using the link specified in the so available at the bankruptcy clerk's office.		
exp	enses if they are high	ints set out in lines 6-15 regardless of your actual expense. In later parts of the rethan the standards. Do not include any operating expenses that you subtract any amounts that you subtracted from your spouse's income in line 13 of Fo	cted from income in lines 5 and 6 of Fo	
If yo	our expenses differ fro	n month to month, enter the average expense.		
Note	e: Line numbers 1-4 a	e not used in this form. These numbers apply to information required by a sin	nilar form used in chapter 7 cases.	
5.	The number of peo	ole used in determining your deductions from income		
	Fill in the number of plus the number of a the number of people	beople who could be claimed as exemptions on your federal income tax return ny additional dependents whom you support. This number may be different fro in your household.	n, om 2	
Nati	ional Standards	You must use the IRS National Standards to answer the questions in line	es 6-7.	
6.		other items: Using the number of people you entered in line 5 and the IRS Notes amount for food, clothing, and other items.	National \$ <b>1,41</b>	0.00
7.	the dollar amount for people who are 65 o	h care allowance: Using the number of people you entered in line 5 and the out-of-pocket health care. The number of people is split into two categories olderbecause older people have a higher IRS allowance for health car cost	people who are under 65 and	

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Peo	ple v	who are under 65 years of age							
	7a.	Out-of-pocket health care allowance per person	\$	75					
	7b.	Number of people who are under 65	Χ	2					
	7c.	Subtotal. Multiply line 7a by line 7b.	\$	150.00		Copy here=>	\$	150.00	
Peo	ple v	who are 65 years of age or older							
	7d.	Out-of-pocket health care allowance per person	\$	153					
	7e.	Number of people who are 65 or older	Χ	0					
	7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00		Copy here=>	\$	0.00	
	7g.	Total. Add line 7c and line 7f			\$	150.00		Copy total here=>	\$150.00_
Loc	al Sta	andards You must use the IRS Local Standards to	ans	swer the question	ons in lin	es 8-15.			
		n information from the IRS, the U.S. Trustee Prog tcy purposes into two parts:	ram	n has divided t	ne IRS L	ocal Standard	l for	housing for	
	lous	ing and utilities - Insurance and operating expens	ses						
■ H	lous	ing and utilities - Mortgage or rent expenses							
	arate Hou	rer the questions in lines 8-9, use the U.S. Trustee instructions for this form. This chart may also be using and utilities - Insurance and operating expense dollar amount listed for your county for insurance a	e av	railable at the best: Using the nu	ankrupt mber of p	cy clerk's offi	ce.	J	specified in the
9.		using and utilities - Mortgage or rent expenses:		3 - 7 -				_	
	9a.	Using the number of people you entered in line 5, fi listed for your county for mortgage or rent expenses		the dollar amou	ınt		\$	1,392.00	
	9b.	Total average monthly payment for all mortgages a	nd o	other debts secu	red by y	our home.			
		To calculate the total average monthly payment, ad contractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.							
		Name of the creditor		Average mo payment	nthly				
		Truist		\$\$	81.00				
						Conv			Repeat this amount
		9b. Total average monthly paymen	t	\$\$	81.00	here=>	\$	2,081.00	on line 33a.
	9c.	Net mortgage or rent expense.							
		Subtract line 9b (total average monthly payment) from or rent expense). If this number is less than \$0, enter			ie	\$		0.00 Copy	. \$0.00
10.		ou claim that the U.S. Trustee Program's division ects the calculation of your monthly expenses, fill					s inc	orrect and	\$
	Ex	plain why:							

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11	Local transportation expenses: Check the number of vehi	clos for which you claim	an ownership or	oporatino	LOVDODGO	
11.	_	cies for which you claim	an ownership or	operating	expense.	
	O. Go to line 14.					
	☐ 1. Go to line 12.					
	2 or more. Go to line 12.					
12.	<b>Vehicle operation expense:</b> Using the IRS Local Standard operating expenses, fill in the <i>Operating Costs</i> that apply for					0.00
13.	<b>Vehicle ownership or lease expense:</b> Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.					
Ve	nicle 1 Describe Vehicle 1:					
	Ownership or leasing costs using IRS Local Standard		\$	0.00		
13b.	Average monthly payment for all debts secured by Vehicle 1					
	Do not include costs for leased vehicles.					
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mon bankruptcy. Then divide by 60.		at			
	Name of each creditor for Vehicle 1	Average monthly payment				
		\$				
	Total Average Monthly Payment	\$	Copy here => -\$	O	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0	), enter \$0	. \$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Ve	nicle 2 Describe Vehicle 2:				_	
13d.	Ownership or leasing costs using IRS Local Standard			0.00		
13e.	Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	. Do not include costs fo	r			
	Name of each creditor for Vehicle 2	Average monthly payment				
		\$				
			Сору		D	
	Total average monthly payment	\$	here => -\$	0.0	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense				Copy net	
	Subtract line 13e from line 13d. if this number is less than \$0	), enter \$0	\$	0.00	Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of				n the \$	242.00
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in what claim more than the IRS Local Standard for <i>Public Trans</i>	vhat you believe is the ap				0.00

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Othe	r Necessary Expenses	In addition to the expense of the following IRS categories		sted above,	you are allowed your monthly expenses	for	
; ;	<b>Taxes:</b> The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.						1,350.00
(	<b>Involuntary deductions:</b> The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.						0.00
		. , , ,	•	•	1(k) contributions or payroll savings.	\$	0.00
1 1	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.						0.00
6	administrative agency, su	ts: The total monthly amount thuch as spousal or child supports on past due obligations for sp	payments.		by the order of a court or  'ou will list these obligations in line 35.	\$	0.00
20. l	Education: The total mo	onthly amount that you pay for	education th	at is either r	equired:		
	as a condition for you	ır job, or					
	for your physically or	mentally challenged dependen	t child if no	oublic educa	ation is available for similar services.	\$	0.00
		nthly amount that you pay for c s for any elementary or second			itting, daycare, nursery, and preschool.	\$	0.00
1 1	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.  Payments for health insurance or health savings accounts should be listed only in line 25.						0.00
1   	3. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.						
	24. Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.						
	Additional Expense Deductions  These are additional deductions allowed by the Means Test.  Note: Do not include any expense allowances listed in lines 6-24.						
i					ses. The monthly expenses for health y necessary for yourself, your spouse, o	r	
ı	Health insurance		\$	0.00			
I	Disability insurance		\$	0.00			
I	Health savings account	-	<b>+</b> \$	0.00	٦		
-	Total		\$	0.00	Copy total here=>	\$	0.00
ı	Do you actually spend this total amount?						
	_ ' ' ' '	o you actually spend?					
١	Yes		\$				
	continue to pay for the re your household or memb	easonable and necessary care	and support no is unable	of an elderl to pay for si	e actual monthly expenses that you will y, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	\$	1,665.00
27. l	77. <b>Protection against family violence.</b> The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.				_		
	By law, the court must keep the nature of these expenses confidential.					\$	0.00

# Case 23-40639 Doc 1 Filed 02/27/23 Entered 02/27/23 14:13:10 Main Document Pg 50 of 62 Julie Smith Case number (if known)

ebtor 1	Julie Smith	Ca	se number (if kn	own)				
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insuranc	e and opera	ting	expense	es on		
	If you believe that you have home energy of 8, then fill in the excess amount of home er	osts that are more than the home energy cosnergy costs	sts included i	in ex	penses	on line	)	
	You must give your case trustee document amount claimed is reasonable and necessary	ation of your actual expenses, and you must ary.	show that th	e ad	lditional		\$	0.00
		Iren who are younger than 18. The monthly pendent children who are younger than 18 years.						
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must not already accounted for in lines 6-23.	explain why	the	amount			
	* Subject to adjustment on 4/01/25, and even	ery 3 years after that for cases begun on or a	fter the date	of a	djustme	ent.	\$	0.00
	80. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be mothan 5% of the food and clothing allowances in the IRS National Standards.							
		ional allowance, go online using the link spec so be available at the bankruptcy clerk's office		sepa	rate			
	You must show that the additional amount of	claimed is reasonable and necessary.					\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable organization	e amount that you will continue to contribute in inization. 11 U.S.C. § 548(d)(3) and (4).	n the form of	f cas	h or fina	ancial		
	Do not include any amount more than 15% of your gross monthly income.						\$	0.00
	32. Add all of the additional expense deductions. Add lines 25 through 31.							1,665.00
Dedu	uctions for Debt Payment							
lo	pans, and other secured debt, fill in lines	in property that you own, including home 33a through 33e. ent, add all amounts that are contractually du						
	creditor in the 60 months after you file for bankruptcy. Then divide by 60.				A			
	Mortgages on your home						Average monthly payment	
33a.	Copy line 9b here					=>	\$	2,081.00
	Loans on your first two vehicles							
33b.	Copy line 13b here					=>	\$	0.00
33c.						=>	\$	0.00
33d.	List other secured debts:							
	e of each creditor for other secured debt	Identify property that secures the debt		incl	es paym ude tax nsuranc	es		
					No			
	-NONE-				Yes		\$	
							Ψ	
					No			
					Yes		\$	
			_		No			
					Yes	+	Φ.	
					165	-	\$	
33e	Total average monthly payment. Add lines	s 33a through 33d	\$	2,08	1.00	Copy total here=	_	2,081.00

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**Julie Smith** Debtor 1 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? ☐ No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure amount Monthly cure amount 108 Timberrun Saint Peters, MO 63376 **41,000.00**  $\div$  60 = \$ **Truist** Saint Charles County \$  $\div 60 = \$$ \$  $\div 60 = +$ \$ Copy total 683.33 Total \$ 683.33 here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. ☐ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 0.00 0.00 36. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total here=> Average monthly administrative expense 2.764.33 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 3,801.00 expense allowances Copy line 32, All of the additional expense deductions \$ 1,665.00 Copy line 37, All of the deductions for debt payment 2,764.33

Total deductions.....

8,230.33

Copy total here=>

8,230.33

\$

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Pg 52 of 62 **Julie Smith** Debtor 1 Case number (if known) Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) 39. Copy your total current monthly income from line 14 of Form 122C-1. Chapter 13 9.128.00 Statement of Your Current Monthly Income and Calculation of Commitment Period. 40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably 0.00 necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as 0.00 specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here => 8,230.33 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Describe the special circumstances Amount of expense \$ Сору 0.00 0.00 Total \$ here=>\$ Copy 44. **Total adjustments.** Add lines 40 through 43. 8.230.33 8.230.33 here=> -\$ 897.67 45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. Part 3: Change in Income or Expenses 46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase. Form Line Reason for change Date of change Increase or Amount of change decrease? ☐ 122C-1 ☐ Increase ☐ Decrease ☐ 122C-2 ☐ 122C-1 ☐ Increase

☐ 122C-2

□ 122C-1

☐ 122C-2

☐ 122C-1

☐ 122C-2

☐ Decrease

☐ Increase

☐ Decrease

☐ Increase

☐ Decrease

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Part 4:	Sign Below
	By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.  /s/ Julie Smith Julie Smith Signature of Debtor 1
Date	February 27, 2023
	MM/DD/YYYY

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation
	\$245	filing fee
	\$78	administrative fee
	+ \$15	trustee surcharge
	\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court Eastern District of Missouri

In r	re _ Julie Smith		Case No.				
		Debtor(s)	Chapter	13			
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	RNEY FOR DE	CBTOR(S)			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20160 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to			
	For legal services, I have agreed to accept		\$	4,800.00			
	Prior to the filing of this statement I have received		\$	600.00			
	Balance Due		\$	4,200.00			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.						
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name						
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	<ul> <li>a. Analysis of the debtor's financial situation, and rende</li> <li>b. Preparation and filing of any petition, schedules, state</li> <li>c. Representation of the debtor at the meeting of credite</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and application</li> <li>522(f)(2)(A) for avoidance of liens on how</li> </ul>	ement of affairs and plan which ors and confirmation hearing, an educe to market value; exe ons as needed; preparation	n may be required; and any adjourned hear emption planning;	rings thereof;			
6.	By agreement with the debtor(s), the above-disclosed fee	e does not include the following	g service:				
		CERTIFICATION					
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	y agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in			
<u> </u>	February 27, 2023	/s/ William H Ridi					
	Date	William H Ridings Signature of Attorne Ridings Law Firm	ey 1				

Suite 205

Name of law firm

Brentwood, MO 63144

(314)968-1313 Fax: (314)968-1302 ridingslaw2003@yahoo.com

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#### United States Bankruptcy Court Eastern District of Missouri

In re	Julie Smith			Case No.		
		Debtor(	s)	Chapter	13	
	VERIFICATION	OF CRE	DITOR MATR	IX		
The above named debtor(s) hereby certifies/certify under penalty of perjury that the attached li containing the names and addresses of my creditors (Matrix), consisting of <u>3</u> page(s) and is true, co complete.						
		/s/ Julie S				
		Julie Smi				
		Debtor	Signature			
		<b>D</b>	Fabruary 27, 222	2		
		Dated:	February 27, 202	3		

Aargon Agency Inc Attn: Bankruptcy 8668 Spring Mountain Road Las Vegas, NV 89117

Account Resolution Corp Attn: Bankruptcy 700 Goddard Ave Chesterfield, MO 63005

Americollect, Inc Po Box 1566 1851 South Alverno Road Manitowoc, WI 54221

AssetCare Attn: Bankruptcy 2222 Texoma Parkway, Suite 180 Sherman, TX 75090

Consumer Collection Management, Inc. Attn: Bankruptcy
Po Box 1839
Maryland Heights, MO 63043

Credit Collection Services Attn: Bankruptcy 725 Canton St Norwood, MA 02062

Day Knight
Attn: Bankruptcy Dept
P O Box 5
Grover, MO 63040

First Premier Bank Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117

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IRS
PO Box 7346
Insolvency Unit
Philadelphia, PA 19101

Kohls/Capital One Attn: Credit Administrator Po Box 3043 Milwaukee, WI 53201 MCA Management Co Attn: Bankruptcy 2835a High Ridge Blvd High Ridge, MO 63049

Merrick Bank Corp Po Box 9201 Old Bethpage, NY 11804

Midwest Recovery Systems Attn: Bankruptcy Po Box 899 Florissant, MO 63032

Missouri Dept of Revenue 301 W High St Jefferson City, MO 65105

National Health Care Col Attn: Bankruptcy Dept 153 Chesterfield Business Parkway Ste. 2 Chesterfield, MO 63005

Navient Attn: Bankruptcy Po Box 9500 Wilkes-Barre, PA 18773

OneMain Financial Attn: Bankruptcy Po Box 3251 Evansville, IN 47731

Resurgent Capital Services Attn: Bankruptcy Po Box 10497 Greenville, SC 29603

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Robert Smith 6100 Saphire Village Unit 149 St Thomas, VI 00802

St Charles County Collector of Revenue 201 N Second St Suite 134 Saint Charles, MO 63301 Truist 214 N. Tryon St Charlotte, NC 28202